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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET					Application Number 10/567,654			Filing Date 08 February, 2006			To be Mailed		
	Substitute	e for Form l	PTO-1360		Applicant(s) GEISSEL, EBERHARD						Page 1 of 1		
					* May be used for additional claims or amendn						ents		
CLAIMS	AS FILED		AFTER FIRST AMENDMENT 07/24/2009		AFTER SEC. AMENDMENT		*		本		*		
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1			1				51						
2				1			52						
3				2			53						
4				1			54						
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7 8				2			57 58						
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43 44							93						
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47							97						
48							98						
49							99						
50							100						
Total			3				Total						
Indep				1.7			Indep	500000000000000000000000000000000000000		***************************************			
Total Depend				17			Total Depend						
Total			2	<u> </u> 20			Total						
Claims]				Claims						

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